PRINTED: 07/20/2015
FORM APPROVED

Healthcare Licensing and Surveys

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	WY0038	A. BUILDING: _____ B. WING _____	07/08/2015

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
WESTWARD HEIGHTS CARE CENTER	150 CARING WAY LANDER, WY 82520

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
S 000	General Comments A Life Safety Code survey was conducted at your facility on July 8, 2015 by the office of Healthcare Licensing and Surveys. (HLS) The facility was a single story building of Type V (111) construction built in 1978. The building was equipped with a supervised automatic wet sprinkler system with an antifreeze loop and an addressable fire alarm system. The facility had a capacity of 60 certified Medicare and Medicaid beds with a census of 54. Wyoming Department of Health, Rules and Regulations for Licensure of Nursing Care Facilities Chapter 19, Section 8 Life Safety and Electrical Safety. The requirements in the Department of Health Chapter III, Construction Rules for Health Facilities apply.	S 000		
S7036	IPC Life Safety - Int'l Plumbing Code This State Rule and Regulation is not met as evidenced by: Based on observation and staff interview, the facility failed to maintain the existing plumbing systems in a manner that is in accordance with the WDH Chapter 3 Construction Rules and Regulations for Healthcare Facilities, in accordance with the original design, and in a safe and sanitary condition. The findings were: Observation of the Janitor Closet on A and B hallways on 07/08/15 from 1:37 PM to 2:02 PM revealed that a hose connection to the wall-mounted chemical dispensing system had been installed without a means of backflow prevention. The chemical dispensing system was connected to the faucet discharge via a hose	S7036	**S7036 IPC Life Safety - Int'l Plumbing Code** **Measures taken to correct deficiency:** Backflow preventors were ordered for the A & B Janitor Closets for the chemical dispensing systems. **How problem is identified and correction to similar situations:** The maintenance supervisor and maintenance tech are aware of the requirement and will check all similar areas for backflow preventors by 8/22/15. **Measures/systemic changes to prevent recurrence:** Education has been provided so they understand they must maintain the	8/22/15

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Natalie Lovell TITLE: Administrator (X6) DATE: 7/31/15

STATE FORM 6899 HFOW11 If continuation sheet 1 of 2

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WY Dept of Health
JUL 31 2015
Healthcare Licensing and Surveys

POC Accepted via Phone Call with Administrator Natalie Lovell on. 8/20/2015 @ 3:45pm.

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S7036	Continued From page 1 connection which had the ability to be under constant pressure. This installation violates the listing of the atmospheric vacuum breaker and creates a potential means for system interconnection. The Facility Maintenance Manager at the time of the observations acknowledged that the connection was not provided with an acceptable means of backflow prevention and created the potential for system interconnection. Ref: 2006 IPC, Sections 604.2, 608.13.5 and 608.15.4.2	S7036	plumbing to the standard in accordance with the WDH Chapter 3 Construction Rules and Regulations for Healthcare Facilities. Monitor permanent solution: A to the maintenance supervisor and tech complete inspection of the building plumbing areas that may require backflow preventors will be done by the Maintenance Supervisor by 8/22/15. The results will be reported at the August 2015 Safety Committee meeting. The maintenance supervisor will check the plumbing quarterly for backflow preventors and report the findings to the Safety Committee meeting on a quarterly basis.	